## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## Mar 12, 2007 8:00 am **Secretary of State DOCUMENT #748707** 03-12-2007 90081 012 \*\*\*\*61.25 THE WOODS CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1901 N. ANDREWS AVENUE 1901 N. ANDREWS AVENUE WILTON MANORS, FL 33311 WILTON MANORS, FL 33311 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02162007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-2014041 City & State City & State Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GRIFFIN, TUCKES Street Address (P.O. Box Number is Not Acceptable) 1901 N. ANDREWS AVE. STE. #102 WILTON MANORS, FL 33311 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Apent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filling Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE ממ U Delete TITLE Kimberly Wischauski 1901 N. Andraus Ave, # 110 BUFORD, DERRICK NAME NAME STREET ADDRESS 1901 N. ANDREWS AVE. #114 STREET ADDRESS CITY-ST-ZIP WILTON MANORS, FL 33311 CITY-ST-ZIP Wilton Manors FL 33311 Delete ☐ Change Addition TIME TITLE steven cooper ROY, MICHAEL NAME NAME 1901 N. Andrews Ave, #215 STREET ADDRESS 1901 N. ANDREWS AVE. #220 STREET ADDRESS WILTON MANORS, FL 33311 CITY-ST-7P 33311 CITY-ST-7IP Wilton Manos FL Delete TITLE TITI F ☐ Addition KELLY, JOSEPH MAME NAME STREET ADDRESS 26 NE 26TH DRIVE STREET ADDRESS CITY-ST-ZIP WILTON MANORS, FL 33334 CITY-ST-ZIP Addition TITLE ☐ Delete TITI F ☐ Change KOHNKE, CHRISTOPHER NAME NAME STREET ADDRESS 1901 N ANDREWS AVENUE #219 STREET ADDRESS CITY-ST-ZIP WILTON MANORS, FL 33311 CITY-ST-ZIP PD ☐ Addition TITLE ☐ Delete ☐ Change GRIFFIN, TUCKER NAME NAME 1901 N. ANDREWS AVE., #102 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WILTON MANORS, FL 33311 CATY-ST-ZUF TILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Carte

Daytime Phone #

RE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

FILED